PATENT APPLICATION

	DECLARATION	AND POWER OF ATTORN	EY NO DOCKE	T NO. 306985.01
·	Med-1909US		MS DUCKE	110. 500-500-5
ATTORNEY DOCKET NO As a below named invento My residence/post office I believe I am the original plural names are listed be entitled: Recall Device	or, I hereby declare that: address and citizenship are as , first and sole inventor (if on elow) of the subject matter to	stated below next to my nally one name is listed below which is claimed and for	ame; v) or an original, first which a patent is son	t and joint inventor (if ught on the invention
Number I hereby state that I have amended by any amend patentability as defined in the state of	reviewed and understood the ment(s) referred to above. I	vas amended on contents of the above-ider acknowledge the duty to c	nufied specification, i	on which is material to
priority is claimed:		DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119
COUNTRY	APPLICATION NUMBER	DATEFICED	YES:	NO;
			YES:	NO:
POWER OF ATTORNEY: As a named inventor, I hereb	y appoint the following attorney(5) as	nd/or agent(a) associated with	· ·	
		Customer No. 22801		
to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.				
to prosecute this application	and transact an outside and		Direct Telephone Calls	To:
Send Correspondence to:	 ·			
Richard J. Holzer, Jr. Lee & Hayes, PLLC 421 West Riverside Avenu	ie, Suite 500		(509) 324-9256	

	DECLARATION AND POWER OF ATTORNEY	
ATTORNEY DOCKET NO.	MS1-1909US	MS DOCKET NO. 306985.01

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Lyndsay Williams	Citizenship: United Kingdom		
Residence: Cambridge, United Kingdom			
Post Office Address: 51 Weavers Field, Girton, Cambridge, CB3 0XB H L w blice Inventor's Signature	27 / 2 / 2 004 Date		
Full Name of Inventor: Kenneth Robert Wood	Citizenship: United Kingdom / Canad		
Residence: Cambridge, United Kingdom Post Office Address: 72 Blinco Grove, Cambridge, CB1 7TS	× 27 Feb 2004		
Inventor's Signature	Date		
Full Name of Inventor: Kevin Michael Schofield	Citizenship: United States		
Residence: Bellevue, WA			
Post Office Address: 14014 SE 44th Street, Bellevue, WA 98006			
Inventor's Signature	Date		

PATENT APPLICATION

	DECLARATION	ON AND POWER OF ATT	ORNEY	
ATTORNEY DOCKET	NO. MS1-1909US			TNO. 306985.01
As a below named inve	entor, I hereby declare that:			300303.01
My residence/post offi	ce address and citizenship are	as stated below next to	my name;	
I believe I am the origi	nal, first and sole inventor (if	only one name is listed	holoxy) on an original firm	and joint inventor (i)
prairie names are used	d below) of the subject matte	r which is claimed and	for which a patent is sour	th on the invention
entitled: Recall Device			1	5-10 SIL INC MIVEMINE
the specification of whi	ch is filed herewith unless the	following how is shorter	J.	
() was filed on a	s US Application Serial No	e DOIS WAS ELECTED STRUCTUOLS	O: P.Ymhania attau at A	•
Number	and	OFFCI	International Application	
I hereby state that I have	and reviewed and understood to	he contents of the above	idomified and first).
amended by any amen	dment(s) referred to above.	I acknowledge the duty	dentified specification, inc	luding the claims, as
patentability as defined	in 37 CFR 1 56	acknowledge the duty	to disclose all information	which is material to
, , , , , , , , , , , , , , , , , , , ,				
Foreign Application(s) and/o	or Claim of Foreign Priority			
I hereby claim foreign priorit	v benefits under Title 35. United Stat	es Code Section 119 of any for	nign application(s) fortt and	
	d below any foreign application for p	patent or inventor(s) certificate	having a filing date before that of	ventor(s) certificate listed
				the application on which
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNI	DER 35 U.S.C. 119
			YES:	NO:
<u> </u>			YES:	NO:
DOT!				
POWER OF ATTORNEY:			•	
As a named inventor, I hereby	appoint the following attorney(s) ar	nd/or agent(s) associated with		
		Customer No. 22801		
	• _			
to prosecute this application a	nd transact all business in the Patent	and Trademark Office connect	ed therewith.	
Send Correspondence to:		Direct Telephone Calls To:		
Richard J. Holzer, Jr.			-	
Lee & Hayes, PLLC			(E00) 224 025 <i>C</i>	
421 West Riverside Avenue	Suite 500		(509) 324-9256	
Spokane, WA 99201				

BEST AVAILABLE COPY

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. MS1-1909US

MS DOCKET NO. 306985.01

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Lyndsay Williams	Citizenship: United Kingdom
Residence: Cambridge, United Kingdom	
Post Office Address: 51 Weavers Field, Girton, Cambridge, CB3 0XB	•
Inventor's Signature	Date
Full Name of Inventor: Kenneth Robert Wood	Citizenship: United Kingdom/Canad
Residence: Cambridge, United Kingdom	
Post Office Address: 72 Blinco Grove, Cambridge, CB1 7TS	
Inventor's Signature	Date
Full Name of Inventor: Kevin Michael Schofield	Citizenship: United States
Residence: Bellevue, WA	
Post Office Address: 14014 SE 44th Street, Bellevue, WA 98006	27 TEBAUM 2004
Inventor's Signature	Dita

Date